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ABSTRACT

The literature on continuing education (CE) in dietetics was reviewed. The review focused on the following: motivators and barriers for participation in continuing dietetic education, formats for CE in dietetics, and approaches to assessing learner needs. The role of professional associations, the existence of voluntary credentialing programs, the rapid pace of change in the field, and the need to maintain practitioner competence were identified as the major motivators of continuing dietetic education. Among the barriers to participation identified were cost, time, travel, and work responsibilities. Workshops, seminars, and self-study were determined to be the major formats for continuing dietetic education at the present time. In one study, more than half of all registered dietitians and dietetic technicians surveyed reported using self-study materials for CE. Most CE programs, workshops, and meetings were conducted under the auspices of a sponsoring professional organization. Workshop topics and methods were generally geared toward the practice of the profession. A variety of approaches were used to assess learners' needs, including surveys, and focus groups. It was recommended that the practice audit model of assessing learner needs be used more and that research into the individual learning projects and practices of dietetic practitioners be conducted. (Contains 14 references.) (MN)

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NOURISHING PROFESSIONAL PRACTICE: CONTINUING EDUCATION IN DIETETICS

A Literature Review Submitted
in Partial Fulfillment of the
Requirements for AC 735

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November 1994

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NOURISHING PROFESSIONAL PRACTICE: CONTINUING EDUCATION IN DIETETICS

Continuing education nourishes professional practice by affording practitioners the opportunity to improve current skills, gain new knowledge, and adapt to changes in the profession. During the past two decades the area of adult and continuing education devoted to continued learning for the professions has grown considerably. Eurich (1985) estimates that billions of dollars are spent annually to provide and attend formal continuing education programs. The major providers of continuing education include professional associations, universities and professional schools, employing agencies, and independent providers (Cervero, 1988). Within the practice of dietetics, continuing education has emerged as an essential element of on-going professional development.

The field of dietetics is diverse and growing. Practitioners in the field represent every level of practice. The field has a dynamic knowledge base that spans the natural sciences, education, psychology, and business management. Practitioners in the field can be found in a multitude of roles: teaching in universities, conducting research, informing the community, providing dietetic education to hospital patients, and coordinating complex food production systems. Continuing education is the practitioner's vital link to staying current with the field.

The various levels of practice, the diverse knowledge base in the field, and the prevalence of continuing education opportunities in dietetics makes it a subject worthy of investigation and inquiry. This literature review examines various aspects of continuing education in dietetics and offers suggestions for further research. The review began by consulting Cervero (1989). To gain an a complete understanding of the topic I included topics on general continuing professional education in my review of the literature. I then focused the review on continuing education within the field of dietetics. Electronic searches on ERIC, Dissertation Abstracts, and CINAHL under the terms "dietetics and continuing education" produced a limited number of references. Reviewing indexes to publications of the American Dietetic Association, including the 1984 Study on the Profession of Dietetics (1985) and the Journal of the American Dietetic Association under the topics of "continuing education and professional development" produced a significant number of resources.

The major themes of the literature review include the motivators and barriers for participation in continuing dietetic education, formats for continuing education in dietetics, and approaches to assessing learner needs. Motivators of continuing dietetic education include professional associations, voluntary credentialing programs, the rapid pace of change, and the need to maintain practitioner competence. Workshops, seminars, and self-study are the major formats for continuing education that were identified in the

literature. The barriers to participating in continuing dietetic education include cost, time, travel, and work responsibilities.

Motivators and Barriers for Participation in Continuing Dietetic Education

Why do dietetic professionals participate in continuing education? Understanding the context in which members of the dietetic profession practice provides insight into practitioners' motives for participating in continuing education. The literature identified several significant reasons for participation in continuing dietetic education . The role of professional associations, the existence of credentialing programs, the rapid pace of change, and the need to maintain practitioner competence are among these influences.

Professional Associations

Professional associations are often the center of continuing professional development. The field of dietetics is no exception. Professional associations are among the major providers of continuing education (Flynn, Bryk, & Neal, 1991). The American Dietetic Association policy on continuing professional education was adopted by its members through their elected leaders in October, 1986. The policy states, " Continuing education is an essential requirement for the growth and maintenance of the professional performance of members. Guided by the standards of practice for the profession of dietetics, association members assume the individual

responsibility of increasing their knowledge and skills through continuing education opportunities" (American Dietetic Association, 1988). Professional associations are major motivator for participation in continuing education. Associations organize and offer continuing education programs and encourage the on-going professional development of members.

Voluntary Credentialing Programs

Members of dietetic professions and occupations voluntarily participate in various programs to gain certification or registration. Voluntary credentialing programs have become increasingly popular (Hanniford, 1989). Voluntary credentialing programs typically require continuing education as a requirement for maintenance of certification or registration. Hanniford (1989) describes 77 voluntary programs offering professional credentialing for individuals in a wide range of fields, including dietetics and dietary management.

According to Hanniford (1989), registered dietitians must accrue 75 hours of approved continuing education over a five year period to maintain registration. Dietetic technicians, registered must acquire 50 hours of approved continuing education over a five-year registration period. The Commission on Dietetic Registration is the body that is responsible for overseeing the continuing education requirements for registered dietitians and dietetic technicians. The Certifying Board of Dietary Managers directs policy and administers the certified dietary manager credential. Certified

dietary managers must earn 45 clock hours of continuing education every three years in order to be recertified (Hanniford, 1989). Through voluntary participation in credentialing programs members of the dietetic profession accept compulsory participation in continuing education as a requirement to maintain certification or registration.

The Rapid Pace of Change

The context of dietetics requires the practitioner to possess a diversity of skills and knowledge. This extensive knowledge base is expanding at an increasing rate. Continuing education is essential to maintaining the skills necessary to practice. Partlow, Spear, and Oaklief (1989) researched the economic and noneconomic benefits of participating in continuing education for registered dietitians. In a study by Partlow et al. (1989) dietitians were asked to rate the economic and noneconomic benefits of participation in continuing professional education. Dietitians rated "learning recent job knowledge" as the highest economic benefit (Partlow et al., 1989). Learning recent job knowledge seems to reflect the need to keep pace with change. In another study investigating the reasons registered dietitians gave for participating in continuing education, keeping abreast of new developments in the field was the highest rated reason for participation in continuing education (Long, 1991). The growth and expansion of knowledge in the field of dietetics and the changing context of the professional environment is another primary motivator for participation in continuing education.

Maintaining Practitioner Competence

Participating in continuing education has been recognized as demonstration of continued competence beyond initial certification (Commission on Dietetic Registration, 1985). A study on the profession of dietetics declares that dietetics is a honored profession. It's practitioners seek to live up to high professional standards of integrity, vision, competence, and service (American Dietetic Association, 1985). The Commission on Dietetic Registration's philosophy of continuing education is that continuing education is a lifelong self-development process requiring long- and short-range goals that are developed, evaluated, and adjusted on a personal and individual basis (American Dietetic Association, 1985).

Barriers to Participation

Lack of time and money were identified as barriers to participation among dietitian members of the American Association of Diabetes Educators (Anderson et al., 1992). Among dietary managers cost and travel were identified as the major barriers to attendance at national meetings (Everett, 1994). Work responsibilities and travel were the most prevalent barriers to attendance at state meetings among dietary mangers in Pennsylvania (Kinneer, 1994). The barriers affecting dietetic professionals participation in continuing education seem common to other education activities. The research in this area of continuing dietetic education seems limited to identifying barriers.

Formats for Continuing Education in Dietetics

The Commission on Dietetic Registration and the Certifying Board of Dietary Managers have identified a number of acceptable formats for continuing education activities. These include academic coursework, study groups, journal clubs, workshops and seminars, poster presentations, and exhibits. A variety of self-study programs are also approved, including audio and video materials, study kits, and self-assessment modules (American Dietetic Association, 1988).

Workshops and Seminars

Flynn et al. (1991) studied the continuing education needs and practices of registered dietitians and dietetic technicians. Both registered dietitians and dietetic technicians were asked to indicate the three continuing education formats that they had used most frequently in the past three years. For registered dietitians, the most popular events were state and district dietetic association workshops and meetings. The continuing education events most frequently used by dietetic technicians were workshops or meetings sponsored by district dietetic associations and local hospitals. Dietetic technicians most preferred lectures, workshops that involve attendee participation, and self-study materials (Flynn et al., 1991).

According to Partlow et al. (1989), the two highest perceived strengths of the continuing education experience were the expertise of the instructor and the instructor's ability to explain or demonstrate. Long (1991)

discovered that registered dietitians perceive collegial learning as very important to their participation in continuing professional education. A needs assessment study completed by dietitian members of the American Association of Diabetes Educators determined that participants in the study have a preference to learn by attending symposia and workshops (Anderson et al., 1992).

Self-Study Programs and Materials

More than half the registered dietitians and dietetic technicians in one study reported using self-study materials for continuing education (Flynn et al., 1991). Articles in publications, academic coursework, satellite broadcasts, and video cassettes are examples of the self-study methods used by dietetic practitioners. A large number of registered dietitians state that they would not use audio cassettes, study groups, or computer-assisted instruction. Dietetic technicians indicated that they would sometimes use articles in publications, academic coursework, and video cassettes but almost half indicated that they would not use study groups or computer-assisted instruction.

In August 1982, the first continuing education article appeared in the Journal of the American Dietetic Association (American Dietetic Association, 1985). Practitioners complete a self-administered test after reading the continuing education article and submit the test for evaluation. Practitioners receive one hour of continuing education for successfully completing the test.

Since 1984, articles have appeared each month. In discussing the articles, the 1984 Study Commission said, "Articles specifically designed for continuing education are providing an extremely valuable service to members" (American Dietetic Association, 1985).

Assessing Continuing Education Needs

Continuing education programs, workshops, and meetings are usually conducted under the auspices of a sponsoring professional organization. The topics of workshops and methods are generally geared toward the practice of the profession. A variety of approaches including surveys, focus groups, and practice audits have been used to determine continuing education needs.

Continuing Education Interest Surveys

The continuing education needs of registered dietitians in Pennsylvania were the subject of research by Klevans and Parrett (1990). The researchers used a multi-method needs assessment process to generate both qualitative and quantitative data about continuing professional education needs. Data obtained from focus groups of registered dietitians were used to develop surveys that were distributed at a statewide conference. Participants demonstrated an interest in topics such as computer applications, patient education, staff development, and time management. The researchers concluded that a comprehensive plan for dietitians' professional development through continuing professional education should include structured needs assessments. A study of dietitian members of the

American Association of Diabetes Educators used a mail survey to identify continuing education interests. Respondents were interested in learning about the interrelationships of diabetes, nutrition, weight loss, medication and exercise (Anderson et al., 1992).

Two studies have explored the continuing education interests of dietary managers. A national survey was mailed to 2,500 members of the Dietary Managers Association. The participants indicated interest in programs related to quality improvement, computer applications, and staff development (Everett, 1994). Participants identified complying with regulations as the leading job challenge. Another survey, distributed at a statewide conference in Pennsylvania, measured the level of interest in twenty-four potential continuing education topics (Kinneer, 1994). Dietary managers in this study were interested in learning more about complying with regulations, developing quality improvement programs, dealing effectively with difficult people, and applying principles of geriatric nutrition.

Practice-Oriented Approach to Needs Assessment

The W.K. Kellogg Foundation sponsored the Continuing Professional Education Project at Pennsylvania State University from 1980-1985. The objectives of the program were: (1) to bring the university and the professions into collaboration, (2) to focus continuing education activities as closely as possible to the needs of the profession at the point of practice, and (3) to develop the basis for long-term association by institutionalizing the

professional development process in both the university and the profession (Toombs & Lindsay, 1984). Five professions were involved in the project: architecture, accounting, clinical psychology, nursing, and clinical dietetics (Toombs & Lindsay, 1984). The project developed and implemented a practice audit model. The first substantive activity in the practice audit model was to determine with as much clarity as possible the body of knowledge, skills, and judgement required for practice in the field. Role delineation studies, surveys, and practice analysis were used in this process by a team which included established professionals in the field and representatives of the university. A set of assessment experiences were constructed based on the practice description. The assessment experiences included video tapes, live actors in face-to-face exchanges, one-on-one encounters, written responses, and clinical simulations. A sample of practicing professionals gathered in day-long sessions to complete the assessment experiences, described as "vignettes of practice (p. 12)" (Toombs & Lindsay, 1984). From an evaluation of group performance, a set of needs were identified. This needs assessment became the basis for program planning activities. The practice-oriented approach is a contrast to the usual interest survey method of needs assessment. It offers the opportunity to identify gaps in professional practice and the potential to enhance practice.

Discussion

The field of dietetics possesses a commitment to lifelong learning. This commitment is evidenced in the mission, philosophy, and activities of the professional associations. The establishment of voluntary credentialing programs have provided the framework for a developing continuing education system. The methods of continuing education in dietetics are as varied as they are prevalent. Dietetic professionals want a variety of methods and options for continuing education. Workshops or seminars and self-study are among the most preferred methods. Dietetic professionals enjoy the opportunity to interact and exchange ideas with their peers. Fellow practitioners represent a rich resource for learning and growth. In contrast, dietetic practitioners also use journal articles, video tapes, and self-study kits to meet their individual learning needs. This may be one way of overcoming the barriers of time, travel, cost, and work responsibilities. Dietetic professionals appear to be self-directed learners. The philosophy of the Commission on Dietetic Registration envisions continuing education as a lifelong, self-development process that is adjusted on an individual basis.

If dietetic professionals are self-directed learners, should they be solely responsible for identifying their individual continuing education needs? Needs and interests surveys identify what practitioners want to learn, but they may not identify what practitioners need to learn. This issue is important in many respects. Many adult educators view participation in

learning as a voluntary act where the learner's felt needs are basic motivation for learning. The implications of this approach is that continuing education may become entirely driven by learner's subjective or felt needs. The practice audit model utilizes peers in identifying normative needs or gaps in the performance of a group rather than the felt needs of individuals. The practice audit model might be used to plan the on-going advancement of the field. Which needs should continuing educators serve, normative needs of the group or the felt needs of individuals?

I suggest that the goal of continuing education in dietetics should be to serve both needs. The practice audit model, while resource intensive, provides valuable information for structuring continuing education programs that will advance the level of professional practice. Felt needs are also important to the continuing educator. Continuing educators should use surveys, questionnaires, interviews, and focus groups to identifying trends and changes in professional practice. The combination of methods can provide the basis for planning effective continuing education programs.

There is no evidence to suggest that the practice audit model has been utilized to identify continuing education needs of dietetic technicians or dietary managers. This is an area worthy of further investigation. Another potential area for further research is to explore how dietetic practitioners identify and pursue their individual learning needs. Do practitioners haphazardly attend continuing education activities that are convenient to

their schedule or location? Or do dietetic practitioners chose continuing education opportunities to fulfill a carefully developed plan for self-development? Research into the individual learning projects and practices of dietetic practitioners would prove insightful for continuing educators. In conclusion, continuing education in dietetics has the potential of fulfilling the promise of improving and refining professional practice. The impact of continuing education is dependent upon effective needs assessment and program planning. To achieve this need, continuing educators must use a variety of methods to assess the felt and normative continuing education needs of dietetic practitioners.

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